

218269

91-70-C

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

 TYPE: ☐ IXC ☐ CLEC ☐ ILEC ☐ Wireless

CERTIFICATED COMPANY INFORMATION

<u>Global Tel * Link Corporation</u>	
Company Name	FEIN/SSN
	<u>703-955-3910</u>
Dbafka	Telephone #
<u>12021 Sunset Hills Rd.</u>	
Mailing Address	
<u>Reston, VA 20190</u>	
City, State, Zip Code	
Business Location	
City, State, Zip Code	County

REGISTERED AGENT INFORMATION

Registered Agent:	<u>National Registered Agents, Inc.</u>
Mailing Address:	<u>2. Office Park CT Suite 103</u>
City, State, Zip Code:	<u>Columbia, SC 29223</u>

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

A.	<u>David Silverman</u>
	General Manager (Include address if different than above.)
	<u>703-955-3910</u> <u>1703-435-0980</u> <u>DSilverman@GTL.NET</u>
	Telephone Number Facsimile Number E-mail Address
B.	<u>Theresa Easley</u>
	Customer Relations / Complaints Representative (Include address if different than above.)
	<u>703-774-3318</u> <u>1703-435-0980</u> <u>TEASLEY@GTL.NET</u>
	Telephone Number Facsimile Number E-mail Address
C1.	<u>Theresa Easley</u>
	Customer Relations / Complaints Representative for Escalated Complaints (Include address if different than above.)
	<u>703-774-3318</u> <u>1703-435-0980</u> <u>TEASLEY@GTL.NET</u>
	Telephone Number Facsimile Number E-mail Address
C2.	<u>1-800-231-0193</u>
	Customer Contact (Toll Free Number)
D.	
	Engineering Operations (Include address if different than above.)
	<u>1</u> <u>1</u>
	Telephone Number Facsimile Number E-mail Address

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E.

Test and Repair (Include address if different than above.)

Telephone Number

Facsimile Number

E-mail Address

F.

Emergencies (During non-office hours)

Telephone Number

Facsimile Number

E-mail Address

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

G.

Dorothy Cukier

Regulatory Officer (Include address if different than above.)

703-955-3915 / 1703-435-0980 / DCUKIER@GTL.NET

Telephone Number

Facsimile Number

E-mail Address

H.

Dual Party Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

I.

Interim LEC Fund Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

J.

Dorothy Cukier

Universal Service Fund Mailings (Name)

12021 SUNSET HILLS RD, RESTON, VA 20190

Mailing Address

703-955-3915

1703-435-0980 / DCUKIER@GTL.NET

Telephone Number

Facsimile Number

E-mail Address

K.

Same.

Gross Receipts Mailings (Name)

Mailing Address

Telephone Number

Facsimile Number

E-mail Address

Therese Easley

This form was completed by (print name)

Legal Regulatory Analyst

Title

[Signature]

Signature

7/9/09

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC
Docketing Department
Post Office Drawer 11649
Columbia, South Carolina 29211

Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201

(Rev. PSC 03/2009)